

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 16 OF 56

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Robin Kelly for Congress

Full Name (Last, First, Middle Initial)

Donna Miller

A.

Mailing Address PO Box 1925

City

Matteson

State

IL

Zip Code

60443-4925

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Heart Association

Occupation

Director

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2014

Transaction ID : C9653073

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Joseph M. Moser

B.

Mailing Address 775 Brookwood Drive

City

Olympia Fields

State

IL

Zip Code

60461-1509

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INGALLS DEVELOP FOUNDATION

Occupation

Administration

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2014

Transaction ID : C9651628

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Janet R. Muchnik

C.

Mailing Address 23 Woodland Glen

City

Park Forest

State

IL

Zip Code

60466-2514

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

City Manager Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2014

Transaction ID : C9654594

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

850.00